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## ESPS PEER-REVIEW REPORT

**Name of journal:** World Journal of Gastroenterology

**ESPS manuscript NO:** 25551

**Title:** Nationwide trends and predictors of inpatient mortality in 83884 transjugular intrahepatic portosystemic shunt

**Reviewer's code:** 03031232

**Reviewer's country:** France

**Science editor:** Ze-Mao Gong

**Date sent for review:** 2016-03-15 10:22

**Date reviewed:** 2016-03-22 01:50

CLASSIFICATION	LANGUAGE EVALUATION	SCIENTIFIC MISCONDUCT	CONCLUSION
<input type="checkbox"/> Grade A: Excellent	<input checked="" type="checkbox"/> Grade A: Priority publishing	Google Search:	<input type="checkbox"/> Accept
<input checked="" type="checkbox"/> Grade B: Very good	<input type="checkbox"/> Grade B: Minor language polishing	<input type="checkbox"/> The same title	<input type="checkbox"/> High priority for publication
<input type="checkbox"/> Grade C: Good	<input type="checkbox"/> Grade C: A great deal of language polishing	<input type="checkbox"/> Duplicate publication	<input type="checkbox"/> Rejection
<input type="checkbox"/> Grade D: Fair	<input type="checkbox"/> Grade D: Rejected	<input checked="" type="checkbox"/> No	<input checked="" type="checkbox"/> Minor revision
<input type="checkbox"/> Grade E: Poor		BPG Search:	<input type="checkbox"/> Major revision
		<input type="checkbox"/> The same title	
		<input type="checkbox"/> Duplicate publication	
		<input type="checkbox"/> Plagiarism	
		<input checked="" type="checkbox"/> No	

### COMMENTS TO AUTHORS

the authors reported the results of a large-scale national trends investigating in-patient death following TIPS. hepatic encephalopathy represents a common diagnoses. to our knowledege, hepatic encephalopathy remains a contre-indication. it might useful to include MELD score in multivariate logistic regression analysis. did the authors try to develop and validate a scoring system for in-patient mortality following TIPS. a validated score can be used in the daily clinical practice in order to select patient to improve post-TIPS mortality and clinical outcome of TIPS.



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**Name of journal:** World Journal of Gastroenterology

**ESPS manuscript NO:** 25551

**Title:** Nationwide trends and predictors of inpatient mortality in 83884 transjugular intrahepatic portosystemic shunt

**Reviewer's code:** 03538478

**Reviewer's country:** China

**Science editor:** Ze-Mao Gong

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CLASSIFICATION	LANGUAGE EVALUATION	SCIENTIFIC MISCONDUCT	CONCLUSION
<input type="checkbox"/> Grade A: Excellent	<input type="checkbox"/> Grade A: Priority publishing	Google Search:	<input type="checkbox"/> Accept
<input type="checkbox"/> Grade B: Very good	<input checked="" type="checkbox"/> Grade B: Minor language polishing	<input type="checkbox"/> The same title	<input type="checkbox"/> High priority for publication
<input checked="" type="checkbox"/> Grade C: Good		<input type="checkbox"/> Duplicate publication	
<input type="checkbox"/> Grade D: Fair	<input type="checkbox"/> Grade C: A great deal of language polishing	<input type="checkbox"/> Plagiarism	<input type="checkbox"/> Rejection
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		<input type="checkbox"/> Duplicate publication	
		<input type="checkbox"/> Plagiarism	
		<input checked="" type="checkbox"/> No	

### COMMENTS TO AUTHORS

In this study, using the National Inpatient Sample (NIS) database from 1998 to 2012, the authors evaluated several factors contributing to in-patient mortality in 83,884 TIPS performed in the U.S. in 15 years. In general, the main idea is interesting because this is a large-scale, national trends data investigating in-patient death following TIPS. Factors affecting patient survival following TIPS has been extensively studied in the past. However, the majority of these studies are of a limited sample size. No contemporary nationwide analysis of patient demographic, hospital, and diagnostic data to in-patient mortality has been performed. Comments: 1. There is a lack of MORE DETAIL explanation of statistical methods used in the study. 2. "General outcomes were further categorized as 'before 2005' or 'after 2005' to investigate the effects of the commercial availability of PTFE-covered stents around 2003-2004". Now that, the article is concerning about the Inpatient Mortality, would it be better if general outcomes were categorized as 'before 2004' or 'after 2004', as the Inpatient Mortality is remarkable according to the figure 2B. 3. There is a mistake in Figure 1, Is the number of unweighted NIS TIPS correct, n=17504? Which is less than that of weighted TIPS. 4. Chi-square P



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value in table 2, Diagnosis (ICD-9 code) is redundant.